

10/05/01
JC685 U.S. PTO

10-09-01

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

JC621 U.S. PTO
09/972712
10/05/01

Attorney Docket No.		CRYPT1120	
Client Matter Number		2102850-165565	
First Inventor or Application Identifier:		C. Zimman	
Title:		Method and Apparatus for Removing Heat from a Protection Region Within a Tamper Responsive Package	
Express Mail Label No.:		EL617041822US	
Application Elements (See MPEP chapter 600 concerning utility patent application contents)		ADDRESS TO: Assistant Commissioner For Patents BOX PATENT APPLICATION Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, & duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>15</u>] (preferred arrangement set forth below) <ul style="list-style-type: none"> • Descriptive title of the invention • Cross References to Related Applications • Statement Regarding Fed sponsored R&D • Background of the invention • Brief Summary of the invention • Brief Description of the Drawings (if filed) • Detailed Description • Claim(s) • Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets <u>5</u>] 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>3</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power Of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS/PTO 1449) <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment (____ pgs.) 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input checked="" type="checkbox"/> Express Mail Certification 17. <input type="checkbox"/> Request And Certification under 35 USC 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 18. <input checked="" type="checkbox"/> OTHER: Check # 491162 (\$544.00)	
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-In-Part of prior application no.: ____ / ____ Prior application information: Examiner: _____ Group/Art Unit: _____			
18. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number (25548) Or Bar Code Label OR <input checked="" type="checkbox"/> Correspondence Address Below			
NAME		ATTN: Terrance A. Meador	
ADDRESS		GRAY CARY WARE & FREIDENRICH	
		4365 Executive Drive, Suite 1600	
		San Diego, CA 92121-2189 USA	
Telephone: 858-677-1400		General Fax No.: 858-677-1477	
		Patent Group Fax No.: 858-677-1465	
Name (print/type)	Charles D. Gavrilovich	Registration No.:	41,031
Signature		Date	10/05/01

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FEE TRANSMITTAL

Attorney Docket No.	CRYPT1120
First Named Inventor:	C. Zimman
Application Number	Unknown
Filing Date:	Herewith
Examiner Name:	Unknown
Group/Art Unit:	Unknown

TOTAL AMOUNT OF PAYMENT:	\$ 544.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 07-1895 Deposit Account Name: GRAY CARY WARE & FREIDENRICH <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other

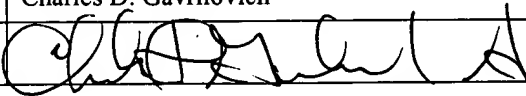
2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 740.00	\$370.00	\$ 370.00
Total Claims	30 - 20 =	10	X \$ 18.00	X \$ 9.00	\$ 90.00
Independent Claims	5 - 3 =	2	X \$ 84.00	X \$ 42.00	\$ 84.00
Multiple Dependent Claim(s) (if applicable)			\$ 270.00	\$135.00	\$ 000.00
Total of above Calculations =					\$ 544.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 320.00	\$ 160.00	\$ 000.00
Reissue filing fee	\$ 710.00	\$ 355.00	\$ 0.00
Provisional filing fee	\$ 150.00	\$ 75.00	\$ 0.00
Total of above Calculations =			\$

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	Charles D. Gavrilovich	Registration No.: (Attorney/Agent)	41,031
Signature		Date	10/05/01

EL617041822US

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DATE OF DEPOSIT: October 5, 2001

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Rachel Carter

NAME

Rachel Carter

SIGNATURE

CRYPT 1120

New patent application

2102850-165565